



Please Join Our Hosts

Kelly and James Bick, Jr.
Kristina and Giorgio Bucci
Ashley and Matt Carr
Deborah and Paul Fleischut
Mark J. Gaertner
Chris Graville
Michael Goessling

Ted Jacoby
Tricia and Jim Newell
Julie and Dan Wagner
Tom Walsh
Colleen and David Wasinger
Mandy and Josh Wright

(Host committee in formation)

for a Reception Supporting

Secretary Jay Ashcroft

Republican Candidate for Governor

Thursday, June 15, 2023

5:30pm – 7:00pm

Home of Kristina and Giorgio Bucci

1804 Woodmark Road

Town and Country, Missouri

Suggested Contribution Levels

Host - \$5,650 per couple/\$2,825 per individual

Sponsor - \$1,000 per individual

Attendee - \$500 per individual

RSVP to Chris Graham at

202-716-5944 or rsvp@grahamadvisorsllc.com

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Event Response Form

- Yes, I would like to attend the June 15, 2023 Reception!
- I am unable to attend the event but would like to make a contribution.

Enclosed please find my contribution of:

- \$5,650 max per couple
- \$2,825 max per individual
- \$1,000
- \$500
- \$250
- Other \$ _____

The maximum aggregate contribution is \$5,650 per couple and \$2,825 per individual or LLC. If donating from an LLC, the LLC must be registered with the Missouri Ethics Commission at www.mec.mo.gov/LLC/registration.

Individuals under contract with Missouri for over \$500 must disclose this information. By donating, you certify that you are aware of and in compliance with the rules above, and you further certify: That you are at least eighteen years old and a U.S. Citizen.

Make checks payable to: **Ashcroft for Missouri**

Mail or email this form to: Ashcroft for Missouri
P.O. Box 1554, Jefferson City, MO 65102
rsvp@ashcroftformissouri.com

Contribute Online: <https://secure.winred.com/ashcroft-for-missouri/donate-today>

Please direct questions to: Chris Graham or Shanna Kline
202-558-6997, rsvp@ashcroftformissouri.com

PLEASE COMPLETE THE FOLLOWING

State Election Law requires us to obtain and report your occupation and the name of your employer.

Name _____

Mailing Address _____

E-mail _____

Phone (H): _____ (W): _____ (C): _____

Employer _____ Occupation _____

Signature _____

*If joint contribution, please include the following

Spouse Name _____

Spouse Employer _____ Spouse Occupation _____

Spouse Signature _____

COMPLETE THE FOLLOWING TO CONTRIBUTE BY CREDIT CARD:

Credit Card Type - VISA MC AMEX DISCOVER

Card Number _____

Amount \$ _____ Expiration Date _____ Security Code _____

Cardholder's Name _____ Billing ZIP _____

Cardholder Signature _____

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